Application or Docket Number											
PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 Application or Docket Number STATE OF STATE Application or Docket Number STATE OF STATE Application or Docket Number STATE OF STATE Application or Docket Number STATE Application or Docket Number STATE Application or Docket Number STATE STATE Application or Docket Number STATE STATE											
CLAIMS AS FILED - PART I (Column 1) (Column 2)							MALL E	NTITY	OR	OTHER SMALL	THAN
FO	R	NUM	NUMBER FILED NUMBER EXTRA				RATE	FEE		RATE	FEE
BA	SIC FEE							345.00	OR		690.00
TO	TAL CLAIMS	24	minus 20	0= . [X\$ 9=		OR	X\$18=	10%
	EPENDENT CL			minus 3 = • 6			X39⇒		OR	X78=	468
MULTIPLE DEPENDENT CLAIM PRESENT						Γ	+130=		OR	+260=	′, .
* If the difference in column 1 is less than zero, enter "0" in column 2						<u>ا</u>	TOTAL		OR	TOTAL	1265
CLAIMS AS AMENDED - PART II (a / (a 4 (Column 1) (Column 2) (Column 3)							SMALL ENTITY		OR	OTHER SMALL	
NTA		CLAIMS REMAINING AFTER AMENDMEN	3	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total	. 25	Minus	Z6	=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	. 9	Minus	7	=	T	X39=		OR	X78=	
-	FIRST PRESE	NTATION OF	MULTIPLE DEP	ENDENT CLAIM		T	+130=		l _{OR}	+260=	
							TOTAL		OR	TOTAL	
	// // / (Column 1) (Column 2) (Col						ODIT. FEE]	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAININ AFTER AMENDMEI	G A	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.24	Minus	25	= .		X\$ 9=		OR	X\$18=	
	Independent	• 9	Minus	9	=		X39=		OR	X78=	
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+130=		OB	+260=	
		•				L	TOTAL		OR	TOTAL	
	5/25/0	(0.1,	43	(Caluma 0)	(Column 2)	AC	ODIT. FEE	<u> </u>	10.,	ADDIT, FEE	
1.		CLAIMS		(Column 2) HIGHEST	(Column 3)			ADDI-	1		ADDI-
AMENDMENT		REMAININ AFTER AMENDME		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	Z.,	RATE	TIONAL FEE		RATE	TIONAL FEE
₽ Q	Total	.22	Minus	26	<u>.</u> -		X\$ 9= ·		OR	X\$18=	
WE	Independent	• 9	Minus	e	= _		X39=		OR	X78=	
F	FIRST PRESE	NTATION O	MULTIPLE DEP	ENDENT CLAIM			+130=		1	+260=	·
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							+130= TOTAL		OR	TOTAL	
	"If the "Highest Nu	mber Previous	IV Paid For IN THIS	S SPACE is less th	an 3, enter "3."		DDIT. FEE		JOR	ADDIT. FEE	
	The "Highest Nur	nber Previoush	Paid For (Total or	Independent) is th	e highest numbe	ir toun	d in the ap	propnate bo	x in C	AURIN 1.	